| C | ITY OF TIT | USVILLE | No. of Risk Factor/Interventions Violations | | | 10000 | Date | 101 | 9/1 | 5 | | |
|----------------------|---|--|---|---|--|---|---|--|-----------------|-----------------|----------|---|
| DEPARTMENT OF HEALTH | | | | No. of Repeat Risk | | | | Current | 9/5/20 | 018 | | |
| stat | lishment | | | Factor/Intervention/Violations Location | | | | Phone | Expiration | | | |
| Γit | usville Ma | rkets, LLC./Titusville Save- | A-Lot | 777,538,25 | 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | amond S | St. | FIORE | | | | |
| icen | | Permit Holder | Purpose o | f Insp | ection | Est Type | | Risk Ca | ategory | _ | | |
| erm | t # | | Routine | Follo | ow-up | FS RS | | Hig | gh Med | dium L | .ow | |
| | | FOODBORNE ILLNESS RISK | FACTORS | SAND | PUBL | IC HEALTH | INTERVEN | TIONS | | | | |
| 78 | Circle designa | ated compliance status (IN, OUT, N/O, N/A) for e | ach numbe | red iter | m | | | | ate box for 0 | | | |
| 11 | - in compliance | OUT = not in compliance N/O = not observe Compliance Status | COS R | | plicable | | rrected on-sit | | | R = repeat | violatio | _ |
| | | Demonstration of Knowledge | | Compliance Status | | | | | | | | |
| /20 | 1 | Certification by accredited program, | | 16 | Potentially Hazardous Food Time/Temperature 16 IN OUT N/A N/O Proper cooking time & temperatures | | | | | е | 1 | |
| 1 | IN OUT | compliance with Code, or correct responses | | 17 | 100000000000000000000000000000000000000 | UT N/A N/O | | | oc for hot ho | | | + |
| | | Employee Health | | 18 | 0.000 | UT N/A N/O | | | & temperati | | | + |
| 2 | IN OUT | Management awareness; policy present | | 19 | IN O | UT N/A N/O | Proper hot | holding t | temperatures | S | | İ |
| 3 | IN OUT | Proper use of reporting, restriction & exclusion | | 20 | | UT N/A | | - | temperature | | | 1 |
| 4 | IN OUT N/O | Good Hygienic Practices Proper eating, tasting, drinking, or tobacco use | | 21 | | UT N/A N/O UT N/A N/O | | date marking & disposition public health control; proc & rec | | | | + |
| 5 | IN OUT N/O | No discharge from eyes, nose, and mouth | | | IN O | OT NA NO | Time as pt | Jone Heal | ur control; pi | oc a rec | - | 1 |
| | Pr | eventing Contamination by Hands | | | | | Consum | ner Adv | isory | | | |
| 6 | IN OUT N/O | Hands clean & properly washed | | 23 | IN OU | JT N/A | 7 | er advisory provided for raw or | | | | |
| 7 | IN OUT N/A N/O | No bare hand contact with RTE foods or approved alternate method properly followed | | | | Hig | phly Susceptible Populations | | | | | t |
| 8 | IN OUT | Adequate handwashing facilities supplied & accessible | | 24 | IN OU | JT N/A | Pasteurized foods used; prohibited food not offered | | | ed foods | | |
| | | Approved Sources | | | | | | emical | | | | |
| 9 | IN OUT | Food obtained from approved source | | 25 | IN OU | IT N/A | | Service Servic | ved & proper | ly used | | |
| LO | IN OUT N/A N/O | Food received at proper temperature | | 26 | IN OU | IT N/A | Toxic subst | ances proj | perly identifie | d, stored & | | T |
| 11 | IN OUT | Food in good condition, safe & unadulterated | 1 | | Conformance with Approved Procedures | | | | | | | |
| 12 | IN OUT N/A N/O | Required records available: shelf stock tags, parasite destruction | | 27 | IN OU | | | e with var | riance, specia | | | |
| | | Protection from contamination | | | | | | - | | | | |
| L3 L4 | IN OUT N/A IN OUT N/A | Food separated & protected Food-contact surfaces: cleaned & sanitized | | Ris | isk factors are improper practices or procedures identified as the most p contributing factors of foodborne illness or injury. Public Health Intervention | | | | | st prev | ale | |
| 15 | IN OUT | Proper disposition of returned, previously served, reconditioned & unsafe food | | 1 | contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illness or injury. | | | | | | | |
| | | GO | OD RETA | IL PR | ACTIC | ES | | | | | | |
| ark' | Go | od Retail Practices are preventative measures to bered item is not in compliance Mark "X" in a | control the | additio | n of pat | thogens, chemi | cals and phys | sical object | ts into foods | 5. | | |
| al K | A III DOX II HUHI | bered item is not in compliance. Mark X in a | - | DOX TO | r COS ar | nd/or R COS | =corrected or | n-site dur | ing inspectio | n R =rep | | ٠ |
| | | Safe Food and Water | COS R | | | | Proper Us | e of Lit | oncile | | COS | |
| 8 | Pasteur | rized eggs used where required | | 41 | | In-use utensils | | | CHSHS | | | Ī |
| 9 | | & ice from approved source | | 42 | | Utensils, equip | | | ored, dried & | handled | | İ |
| 0 | Variano | te obtained for specialized processing methods Food Temperature Control | | 43 | Single-use& single-service articles: properly stored & used | | | | | + | | |
| 1 | | cooling methods used; adequate equipment for | | 44 | | Gloves used p | | | d Vandi | | | |
| | temper | ature control | | | | Utensils, Equipment and Vending | | | | | | |
| 2 | Plant fo | ood properly cooed for hot holding | | 45 | | Food & non-food contact surfaces cleanable, properly designed, constructed & used | | | | | | |
| 3 | | ed thawing methods used | | 46 | | Warewashing facilities: installed, maintained, used: test strips | | | | | I | |
| 4 | Inermo | meters provided & accurate Food Identification | | 47 | Non-food contact surfaces clean Physical Facilities | | | | | | | |
| 5 | Food pr | roperly labeled; original container | | 48 | | Hot & cold wa | | | | | | |
| | 10.0.000.0000.000.000.000 | revention of Food Contamination | | 49 | | Plumbing insta | | | | | | I |
| 6 | | , rodents & animals not present; no prized persons | | 50 | Sewage & waste water properly disposed | | | | | | | |
| 7 | | nation prevented during prep, storage & display | | 51 | P P P P P P P P P P P P P P P P P P P | | | | | | T | |
| 9 | 100000000000000000000000000000000000000 | al cleanliness | | 52 | Garbage & refuse properly disposed; facilities maintained Physical facilities installed, maintained & clean | | | | | | | |
| 1.0 | | cloths: properly used & stored g fruits & vegetables | | 53 54 | X | Adequate vent | | | | ucod | + | + |
| 10 | T GSI III I | g a regetables | | 34 | | Aucquate vent | mator & light | ng. uesig | nateu areas | useu | 1 | 上 |
| | in Charge (Signat | | | | | | | | (NO) (Circ | | | |

| | | D ESTABLISHMEN | T INSPECTION F | | | | |
|--|--------------------------------|------------------------------|-------------------------|---------------------|----------------|-------------------|--|
| CITY OF TITUS DEPARTMENT | SVILLE OF HEALTH | | Yes | No | Phone | | |
| Establishment Titusville Market | s, LLC./Titusville Save-A | -Lot | Address/City/State/Zi | p Code | | | |
| | | TEMPERATURE | OBSERVATIONS | | | THEFT | |
| Item/Location | Item/Location Temp | | Тетр | Item/Lo | ocation | Temp | |
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| Day Logo | - 390 | | | | dit escellati | | |
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| | | | | - New District | | | |
| | The second second | | MERNET CO. | TEST FENS | | | |
| | THE PROPERTY OF | OBSERVATIONS AND | CORRECTIVE ACTION | S | | | |
| Item Vio | lations sited in this word | | | | | | |
| | lations cited in this report m | nust be corrected within the | time frames below, or a | s stated in sec | tions 8-405.11 | of the food code. | |
| 53 For | o Guzieli o | Quertesd | LETLIGEBLY | on cut | SIN | WAIK-IN | |
| Ma | A Produce s. | & Wirg les | slori of D | uit sl | Mole | Bue, 12-4) | |
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| | TO LONG THE PARTY | | | | Y Table | | |
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| | A DESCRIPTION OF THE PARTY | | | (Hall Internal Unit | | | |
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| | B1 | 11/1/1 | 6 | | | | |
| Person in Charge (Sig | gnature) | 1141/100 | | | Date: | 019/18 | |
| | MMM | m | | | | | |
| inspector (Signature) | | W | | 74 | Date: | 019118 | |
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